

UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No.:	D03087
	First Inventor:	Michaud
	Title:	A Method and Apparatus for Providing USB Device Support to an Interactive System
	Express Mail Label No.:	EV317194330 US

APPLICATION ELEMENTS (see MPEP chapter 600 concerning utility patent application contents)	Mail Stop Patent Application ADDRESS TO: Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450
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1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. ☐ Applicant claims small entity status
See 37 CFR 1.27
3. ☒ Specification [Total Pages 22]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or computer program listing appendix
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 3]
5. Oath or Declaration [Total Sheets]
 - a. ☒ Newly executed (original or copy)
 - b. ☐ Copy from prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 18 completed)
 - i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)
6. ☐ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. ☐ Nucleotide and/or Amino Acid Sequence (if applicable, all necessary)
 - a. ☐ Computer Readable Form (CFR)
 - b. ☐ Specification Sequence Listing on:
 - i. ☐ CD-ROM or CD-4 (2 copies); or
 - ii. ☐ Paper
 - c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

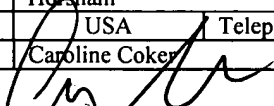
9. ☒ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure ☐ Copies of IDS
Statement (IDS)/PT-1449 Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document
16. ☐ Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☐ Other: _____

18. IF A CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in- Part (CIP) of prior application No. _____
Prior application information: Examiner: _____ Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number						or	<input checked="" type="checkbox"/> Correspondence address below
Name	GENERAL INSTRUMENT CORPORATION						
Address	101 Tournament Drive						
City	Horsham	State	PA	Zip Code	19044		
Country	USA	Telephone	215-323-1797	Fax	215-323-1300		
Name	Caroline Coker	Registration No.			50,516		
SIGNATURE				Date	March 26, 2004		

FEE TRANSMITTAL Patent fees are subject to annual revision <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Complete if Known	
		Application Number	Unknown
		Filing Date	Unknown
		First Named Inventor	Michaud
		Examiner Name	Unknown
		Group Art Unit	Unknown
TOTAL AMOUNT OF PAYMENT	(\$) 1266	Attorney Docket No.	D03087

METHOD OF PAYMENT (check all that apply) <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number 502117 Deposit Account Name MOTOROLA, INC. The Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fees(s) indicated below, except for the filing fee to the above-identified deposit account.	FEE CALCULATION (continued) 3. ADDITIONAL FEES <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge – late filing fee or oath</td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge – late Provisional filing</td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td></tr> <tr><td>1812</td><td>2520</td><td>1812</td><td>2520</td><td>For filing a request for ex parte Reexamination</td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td></tr> <tr><td>1805</td><td>1840*</td><td>1805</td><td>1840*</td><td>Requesting publication of SIR after Examiner action</td></tr> 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(37 CFR § 1.129(a))</td></tr> <tr><td>1810</td><td>770</td><td>2810</td><td>385</td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td></tr> <tr><td>1801</td><td>770</td><td>2801</td><td>385</td><td>Request for Continued Examination (RCE)</td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td>Request for expedited examination of a design application</td></tr> <tr><td colspan="5">Other fee (specify) _____</td></tr> </tbody> </table>	Large Entity		Small Entity		Fee Description	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1051	130	2051	65	Surcharge – late filing fee or oath	1052	50	2052	25	Surcharge – late Provisional filing	1053	130	1053	130	Non-English specification	1812	2520	1812	2520	For filing a request for ex parte Reexamination	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	1805	1840*	1805	1840*	Requesting publication of SIR after Examiner action	1251	110	2251	55	Extension for reply within first month	1252	420	2252	210	Extension for reply within second month	1253	950	2253	475	Extension for reply within third month	1254	1480	2254	740	Extension for reply within fourth month	1255	2010	2255	1005	Extension for reply within fifth month	1401	330	2401	165	Notice of Appeal	1402	330	2402	165	Filing a brief in support of an appeal	1403	290	2403	145	Request for oral hearing	1451	1510	1451	1510	Petition to institute a public use proceeding	1452	110	2452	55	Petition to revive – unavoidable	1453	1330	2453	665	Petition to revive – unintentional	1501	1330	2501	665	Utility issue fee (or reissue)	1502	480	2502	240	Design issue fee	1503	640	2503	320	Plant issue fee	1460	130	1460	130	Petitions to the Commissioner	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	1806	180	1806	180	Submission of IDS	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	1810	770	2810	385	For each additional invention to be examined 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FEE CALCULATION
1. BASIC FILING FEE

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing fee	770
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	780	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)					(\$)770

2. EXTRA CLAIM FEES

Total Claims	3	Previously Paid**	20	=	11	X	Fee from below	18	=	198
Independent Claims	6		3	=	3	X	86	=	258	
Multiple Dependent							290	=		

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	
1202	18	2202	9	Claims in excess of 20	
1201	84	2201	42	Independent claims in excess of 3	
1203	280	2203	140	Multiple dependent claim, if not paid	
1204	84	2204	42	* Reissue independent claims over original patent	
1205	18	2205	9	* Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)					(\$)456

**or number previously paid, if greater; For Reissues, see above.

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Caroline Coker	Registration No.	50,516
Signature		Telephone	215-323-1797
		Date	March 26 2004